# FORM D



UNITED STATES

SECURITIES AND EXCHANGE/COMMISSIO Washington, D.C. 20549

OMB APPROVAL OMB NUMBER: 3235-0076 **Expires:** May 31, 2005 Estimated average burden hours per response......16.00

## NOTICE OF SALE OF SECURI PURSUANT TO REGULATIO SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY							
Prefix   Serial							
DATE RECEIVED							

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  Ontario Partners II, L.P.  1301700
Filing Under (Check box(es) that apply):   Rule 504 Rule 505 Rule 506 Section 4(6) ULOE
Type of Filing: ⊠ New Filing □ Amendment
A. BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer
Name of Issuer (  check if this is an amendment and name has changed, and indicate change.)
Ontario Partners II, L.P.
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
875 North Michigan Avenue, Suite 3620, Chicago, Illinois 60611 (312) 263-2400
Address of Principal Business Operations (Number and Street, City, State, Zip Code)  Telephone Number (Including Area Code)
(if different from Executive Offices)
Brief Description of Business: Investment in securities.
Type of Business Organization
☐ corporation ☐ limited partnership, already formed ☐ other (please specify):
□ business trust □ limited partnership, to be formed PROCESSEI
Actual or Estimated Date of Incorporation or Organization:    Month   Year
GENERAL INSTRUCTIONS
Federal:  Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. Or 15 U.S.C. 77d(6).
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S.

Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid **OMB** control number.

### A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing general partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es)that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partners
Full Name (Last name first, Mansur Capital Corporat			<u> </u>		
Business or Residence Address North Michigan Aver	,		Code)		
Check Box(es)that Apply:	☐ Promoter	□Beneficial Owner	■ Executive Officer	☐ Director	☑ General and/or ··· Managing Partners
Full Name (Last name first, Mansur, E. Barry	if individual)	44 144 144 144 144 144 144 144 144 144			The state of the s
Business or Residence Addi 875 North Michigan Aven	April 17 Carlo Santa Completion and Completion of the Completion o	**	Code)		
Check Box(es)that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	☐ Director	☑ General and/or Managing Partners
Full Name (Last name first, Heskel, Dennis L.	if individual)				
Business or Residence Adda 875 North Michigan Aven			Code)		
Check Box(es)that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partners
Full Name (Last name first, Koeplin, Kurt D.	if individual)	ann Ceungh Basa Talah Basa Basa Basa Basa Talah Basa Basa Basa Basa Basa Basa Basa Ba			
Business or Residence Add 875 North Michigan Aven			Code)		
Check Box(es)that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partners
Full Name (Last name first,	if individual)				
Business or Residence Add	ress (Number and	d Street, City, State, Zip (	Code)		
Check Box(es)that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or ☐ Managing Partners ☐
Full Name (Last name first,	if individual)	and Topic Set (1986) No. 1986 No. 1986			
Business or Residence Add	ress (Number an	d Street, City, State, Zip (	Code)		
Check Box(es)that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partners
Full Name (Last name first,	if individual)	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
Business or Residence Add	ress (Number and	d Street, City, State, Zip (	Code)		
	(Use blank sheet	t, or copy and use addition	nal copies of this sheet.	as necessary.)	

				B. IN	FORMAT	ION ABO	UT OFFE	RING		T. Page		dia .
1. Has the	issuer sold	l, or does th	ne issuer int	end to sen	d, to non-ac	ccredited in	vestors in 1	this offering	g?		Yes □	No ⊠
		,										
Answer also in Appendix, Column 2, if filing under ULOE.  2. What is the minimum investment that will be accepted from any individual?								\$ <u>1,0</u>	00,000			
2. What is the minimum investment that will be decepted from any manyadan							Yes	No				
3. Does the offering permit joint ownership of a single unit?												
	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any											
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering.  If a person to be listed is an associated person of a broker or dealer registered with the SEC and/or with a state or states,												
	e name of th , you may s						e listed are	associated	person of s	uch a brok	er or	
	e (Last nam			in for that	<u> </u>	<u> </u>						
D	D -: 1	A 11	(NI1	1 C+	C'ty Cty	- 7:- C-1	- \		<del></del>			<u> </u>
Business	or Residen	ce Address	(Number	and Street	, City, Stat	e, Zip Code	<del>e</del> )					
Name of	Associated	Broker or	Dealer									
	Which Pers "All States										🗖	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	
$[{ m IL}]$	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Nam	e (Last nan	ne first, if i	ndividual)									
Ruciness	or Residen	ce Address	(Number	and Street	City Stat	e Zin Code	a)					
Dusiness	of Residen	ee Mudress	(Tullioci	and Street	, City, Stat	c, zip cou	~ <i>)</i>					
Name of	Associated	Broker or	Dealer									
States in	Which Pers	on Listed I	as Solicite	d or Intend	s to Solicit	Purchasers						
	"All States										🗖	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
$[{ m IL}]$	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Nam	e (Last nan	ne first, if i	ndividual)									
Business	or Residen	ce Address	Number	and Street	t. City. Stat	e. Zip Code	e)	<u>.</u>				
Name of	Associated	Broker or	Dealer			·-···-						
States in Which Person Listed has Solicited or Intends to Solicit Purchasers												
(Check "All States" or check individual States).							All States					
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offing price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero". If the transaction is an exchange offering, check			
this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Aggregate		Amount
Type of Security Debt	Offering Amous \$		Already Sold  \$ .
Equity	\$	<u> </u>	\$ \$
Common  Preferred	Ψ	<u> </u>	Ψ
Convertible Securities (including warrants)	\$		\$
Partnership Interests	\$_500,000,000	!	\$ <u>42,404,860.</u>
Other (Specify)	\$		\$ <u>.</u>
Total	\$_500,000,000	!	\$ 37,819,489 .
Answer also in Appendix, Column 3, if filing under ULOE			
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero".			
	Number		Aggregate Dollar Amount
Accredited Investors	Investors 21	. :	of Purchases \$ 42,404,860
Non-accredited Investors.			\$ .
Total (for filings under Rule 504 only)			\$ .
Answer also in Appendix, Column 4, if filing under ULOE			
securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.			
	Type of		Dollar Amount
Type of offering	Security		Sold
Rule 505		<u>-</u>	\$
Regulation A		<u>··</u>	\$
Rule 504			Φ.
Total		<u>-</u>	δ σ
			\$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
Transfer Agent's Fees.			\$
Printing and Engraving Costs.		_	\$ \$.
Legal Fees.		_	\$ 10,000
Accounting Fees.			\$ 10,000
Engineering Fees			\$ .
Sales Commissions (specify finder's fees separately)			\$
Other Expenses (identify)			\$
Total		$\boxtimes$	\$ 20,000

C. OFFERING PRICE, NUMB	ER OF INVESTORS, EXPENS	SES AND	USE OI	PROCEE	DS	ragidestinos (1965)
b. Enter the difference between the aggregate of Question 1 and the total expenses furnished in response the "adjusted gross proceeds to the issuer"	\$ <u>499,980,000</u>					
5. Indicate below the amount of the adjusted gross proof for each of the purposes shown. If the amount for and check the box to the left of the estimate. The adjusted gross proceeds to the issuer set froth in resp	any purpose is not known, furnise total of the payments listed m	sh an estin nust equal	nate			
· ·		•	O Dir	ments To  fficers,  ectors, &  ffiliates		Payments To Others
Salaries and fees	•••••			·		\$
Purchase of real estate				<u>.</u>		\$ <u>.</u>
Purchase, rental or leasing and installation of m	achinery and equipment		ַ \$	<u>.</u>		\$ <u>.</u>
Construction or leasing of plant buildings and fa	acilities		ַ \$	<u> </u>		\$ <u>.</u>
Acquisition of other businesses (including the v offering that may be used in exchange for the as issuer pursuant to a merger)			·		\$ \$	
Working capital						\$ .
Other (specify): <u>Investment in Securities</u>	<u> </u>	□ \$	·	X	\$_499,980,000	
Column Totals  Total Payments Listed (column totals added)			□ \$	: \$_49	図 9,980	\$ <u>499,980,000</u> 0,000
Service Company of Property Company (1997)	D. FEDERAL SIGNATURE			•		
The issuer has duly caused this notice to be signed by following signature constitutes an undertaking by the the information furnished by the issuer to any non-accr	y the undersigned duly authorize issuer to furnish to the U.S. Sec	ed person. curities Co	If this mmissio	notice is fi n, upon wr	led ur	nder Rule 505, the
Issuer (Print or Type)	Signature No. Kor	Rli		Da	te <b>%</b> – .	27-04
Ontario Partners II, L.P.  Name of Signer (Print or Type)	Title of Signer (Print or Type)	)	<del></del>	L	<u>U</u>	<u> </u>
Kurt Koeplin	Treasurer, Mansur Capital C	Corporatio	n, Gene	ral Partnei	<u> </u>	

ATTENTION \_\_\_\_\_\_\_\_ ATTENTION \_\_\_\_\_\_\_ Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)